## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION				
O.I.P.E. CLASSIFIER		48	11/28/00	
FORMALITY REVIEW	CM	71632	2/7/01	
RESPONSE FORMALITY REVIEW			101	

## INDEX OF CLAIMS

•	Rejected	N Nor	ı-elected
=	Allowed	1Inte	rference
_	(Through numeral) Canceled	А Арр	eal
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÷ Restricted 0 Objected						
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22 / )	72		122			
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24 25)	74		124	<del>-                                     </del>		
	76	<del>┈╏╶╏</del> ╌╏╌╏╌╏	125	<del>- - - - - - - - - - - - - - - - - - - </del>		
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28	78		128	<del>·├─┼─┼─┼</del>		
29	79	<del></del>	129	<del>- - - - -</del>		
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31	81		131			
32	82		132			
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34 /	64 65	<del>╶┨╶┨╌╏</del> ╌╏	134	<del>- - - - - - -</del>		
38	86	<del></del>	136	<del></del>		
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38	88	<del>╶┠┋</del> ┼┼┼┼┼	138	<del>·┤·┤·</del> ┤ <del>·</del> ┤·┤·		
A39)///	89		139			
40	90		140			
41 /	91	-	141			
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44 /	94		144			
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46	98	<del>┈┤╌</del> ┼╌┼╌┤╴╎	146	<del>- - - - -</del>		
47 /	97	<del>╶┼╍┼╍┼╍┼</del> ╾┼╌┤╴╽	147	<del>╶┧╶┨┈╏╶╏</del> ╌╂╼╂╼╂╾		
49 7 13 14	99	<del>╶╎╶┞╌┞╌╎╌</del> ┼╌┤╸╿	148	<del>╶┼╶┦</del> ╌┦╌╂╶╂╌ <del>╿</del>		
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If more than 150 claims or 10 actions staple additional sheet here

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